Simulation Prebriefing

Questions to answer in the prebriefing are based on Tanner's Clinical Judgment Model:

Directions: Provide in-depth, thorough answers to each of the following questions. Answers should be added directly into this document. Details from the patient's chart can be located on Edvance360 in the Simulation Resources folder labeled Scenario # 1 or Scenario # 2. The prebriefing questions related to noticing and interpreting should be typed and submitted via Dropbox labeled with the simulation name (Prebrief Scenario # 1, Prebrief Scenario # 2) by **0800** the day of your simulation. The prebriefing assignment can be found in the Simulation Resources on Edvance360.

Report:

Review the patient's information in the chart provided on Edvance360 in the Simulation Resources. Utilize the handoff report sheet while reviewing the chart. Fill in the appropriate information from the chart in the corresponding sections of the handoff report sheet. This will be checked for completion immediately prior to starting each simulation scenario.

Formulate additional questions for the off-going nurse to clarify unclear information or missing details. These questions can be written on the back of your handoff report sheet.

Noticing:

What is one thing you notice from the patient's history or report that will guide your initial nursing care (maybe it is specific labs, their diagnosis, or past medical history, etc.)? Explain.

   - I noticed the patient has a history of HTN, COPD, and an enlarged prostate. I also noticed the patient has a left lower leg fracture. I will watch the patients' blood pressure to ensure it does not get too high. I also will watch the patient's oxygen status to ensure it does not get too low. The patient had a history of an enlarged prostate which could be why the BUN levels are abnormal. It also helps to know the patient has a left lower leg fracture because I will know to do a focused assessment and also that the patient can not walk on the leg.

What expectations do you have about the patient prior to caring for them? Explain.

   -I expect the patient may have pain due to the lower left leg fracture. I also expect the patient to be NPO before the procedure. I expect the patients blood pressure may be abnormal due to the noncompliance of the medication.

What previous knowledge do you have that will guide your expectations? Explain.

   -I expect the patient to be non-weight baring on the left leg. I also expect the patient to come back after surgery with a cast on the left lower extremity due to the fracture. The patient will have pins placed in the left lower leg which is what the ORIF is.

Interpreting:

Interpret the following data:

Admitting medical diagnosis (definition of the diagnosis): The patient is having an ORIF done to her left lower leg. This means pins and screws will be placed to help the fracture heal and the patient will have a cast placed after the procedure.

Laboratory data (give rationale for all abnormal lab results):

Abnormal Lab Values	Rationale for Abnormal Lab Values
WBC 11.1X10^3	Fracture to the left lower leg caused an infection
BUN 40	Pt had an enlarged prostate which could cause issues with the kidneys
Creatinine 2.1	Also could be due to the pts enlarged prostate causing problems with the kidneys.

Diagnostic testing (explain what diagnostic tests were done with results):

Diagnostic Testing	Results of Diagnostic Testing
X-ray	Shows a complete open oblique fracture of the left tibia and fibula.

Medications (provide a list of all medications with classification, indication for use, and nursing interventions):

Medication (generic and trade name)	Classification (therapeutic and pharmacologic)	Indication for use (specific to this patient)	Nursing Interventions (Assessment, Education, Safety Measures)
Metoprolol 25mg PO twice a day	- Antianginals, antihypertensives - Beta blockers	-hypertension -angina pectoris	-Monitor BP, ECG, pulse, intake, output, may increase BUN
Aspirin 81mg PO daily	- Antiplatelet agents,	-Inflammatory disorders	-Assess pain, fever, rash, facial swelling

2024

	antipyretics, nonopioid analgesics - Salicylates	(Rheumatoid arthritis, osteoarthritis) -mild to moderate pain	-monitor onset of tinnitus, headache, hyperventilation, agitation, mental confusion, lethargy, diarrhea, and sweating
Atorvastatin 10mg PO daily	-lower cholesterol	- hypercholesterolemia, Atrial fibrillation	-Assess for muscle pain, tenderness, weakness, fever, dark colored urine
Tamsulosin 0.4mg PO daily	-peripherally acting antiadrenergics	-benign prostatic hyperplasia	-Assess for urinary complications, -Monitor intake and output, daily weights, edema, and weight gain
Montelukast 10mg PO daily	-Allergy, cold, and cough remedies, bronchodilators - leukotriene antagonists	-Prevention and chronic treatment of asthma -prevention of exercise-induced bronchoconstriction	-Assess lung sounds, respiratory function, behavior changes, and rashes